MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/

195

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED			TER ndment	AFTER 2 MAMENDMENT	
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TOTAL CLAIMS	3		3			
PTO - 136	0 (REV. 11/04)		30 M-040		

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IND.		1		1		4
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TOTAL CLAIMS						1

PTO - 1360 (REV. 11/04)

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